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## REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS

Application Number	09/766,347
Filing Date	01/19/2001
First Named Inventor	Raghaven, et al.
Art Unit	1641
Examiner Name	Ceperley, Mary
Attorney Docket Number	073979.00067 (MRD-60)1486

I hereby revoke all previous powers of attorney given in the above-identified application.						
A Power of Attorney is submitted herewith.						
OR  ✓ I hereby appoint the practitioners associated with the Customer Number				27805		
☐ Please change the correspondence address for the above-identified application to:  ☐ The address associated with						
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I am the:  Applicant/Inventor.						
Assignee of record of the entire interest. See 37 CFR 3.71.  Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)						
SIGNATURE of Applicant or Assignee of Record						
Signature Jerad & Seures						
Name Jerad G. Seurer						
Date 18	Teb: 2008		4-654-3814			
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.						
*Total of 2 forms are submitted.						

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